

Great Schools for Growing and Learning

Hedges Middle School

369 Fairlane Avenue Winnipeg, Manitoba R2Y 0B6 Phone: 204-837-5843 Fax: 204-888-8093

Date Received	
File Requested:	

Website : sjasd.ca/school/hedges

Twitter : @HedgesHawks Instagram : @HedgesHawks

STUDENT REGISTRATION 2022-23

<u>NOTICE</u>: This registration form is to be completed by the parent/guardian. Providing false, misleading or incomplete information in this application will constitute just cause for possible withdrawal from school.

REGISTRATION INFORMATION		
You are enrolling your child in Grade: 6 7 8	(Please circle one)	
Previous School Attended:		Previous Grade:
STUDENT INFORMATION		
	/ First Name	/Middle Name
(On Birth Certificate) Last Name I agree to provide a birth certificate for the child (if not previously service)		
Preferred First Name:	Dirui i	Date:///////
Gender: M F Trans Person Two Sp	pirit	ming Pronoun:
Home Phone Number:	_ Student Cell Number (if	applicable):
Mailing Address:	/	/ /
Street/Apt #	City	Province Postal Code
If your current school is not in St. James-Assiniboia, h	have you ever attended scho	ol in Manitoba? 🛛 Yes 🛛 No
If yes, name of school:	Manitoba Ed	ucation (MET) #:
Student Social Insurance Number:		
FAMILY INFORMATION		
FAMILY INFORMATION Parent Name:		
	Relationship t	o Student:
Parent Name:	Relationship t	o Student: Postal Code:
Parent Name:	Relationship t City: E	o Student: Postal Code: :mail:
Parent Name:Address (if different from above): Home Phone: Cell Phone:	Relationship t City: :E Work Phone:	o Student: Postal Code: :mail:
Parent Name:Address (if different from above): Home Phone: Cell Phone: Name of Employer:	Relationship t City: :E Work Phone:	o Student: Postal Code: :mail:
Parent Name:Address (if different from above): Home Phone: Cell Phone: Name of Employer:	Relationship t City: : E Work Phone: act number:	o Student: Postal Code: :mail:
Parent Name:Address (if different from above): Home Phone: Cell Phone: Name of Employer: Phone number you would like used as the main conta	Relationship t City: E Work Phone: E Work Phone:	o Student: Postal Code: Email: o Student:
Parent Name:	Relationship t City: E Work Phone: E Work Phone: E Relationship t City: City:	o Student: Postal Code: :mail: o Student: Postal Code:

Phone number you would like used as the main contact number: _____

Legal Custo	dy (<u>if app</u>	licable – as appointe	ed by the	Court of	Queen's	Bench)	:
□ Joint		One Parent	🗆 Gu	uardian	Γ	⊐ Child a	and Family Services
Name of per	son(s) wh	o has (have) legal cu	stody: _				
If joint custoo	ly, is there	primary care and cont	rol assigne	ed? □ Ye	s 🗆 No	o To wh	om?
Legal docum	entation pro	ovided (court orders, r	estraining	orders, e	tc.) 🗆 Ye	es □N	0
Other Relate	d Informatio	on:					
Legal Guarc	lian's Nam	e:			Re	elationsh	ip to Student:
Address (if dif	ferent from ab	oove):		C	ty:		Postal Code:
Home Phone	:	Cell	Phone:			E	mail:
Name of Em	ployer:				Work	Phone:	
Phone numb	er you wou	ld like used as the ma	in contact	number:			
i							
							School:
N	ame:		Age:_		Grade: _	5	School:
Ν	ame:		Age:_		Grade: _	5	School:
Ν	ame:		Age:_		Grade: _	5	School:
Language(s	-		nome:				
Manitoba He	alth # (9-Di	git):					
		- /					one Number:
•		cident insurance?					
It is importan	t that we ar	re aware of any medic	al conditio	ns or on-	going pre	scribed	medications.
Diagnosed I	lealth Nee	ds - Please check all	that apply:				
Is the studen	t on any on	n-going prescribed me	dications:	□ Yes	□ No	Specify	/:
lf yes, who a	dministers	during school hours:	□ Home	□ Self	□ Sch	ool	(Administration of Prescribed Medication Form must be completed
Allergies	□ Yes	□ No	EpiPen	□ Yes	□ No	Allergio	c to:
Asthma	□ Yes	□ No	Inhaler	□ Yes	□ No		
Diabetes	□ Yes	□ No	Seizures	□ Yes	□ No		
Hearing	□ Yes	□ No	Vision	□ Yes	□ No		
□ Other – Pl	ease Speci	ify:					
Do you have	any conce	rns regarding your chi	ld's speecl	h and lan	guage?	□ Yes	□ No
Does this stu	ident have a	a URIS file?				□ Yes	□ No
		ongoing medical condi Il health care/URIS pla					ould you like your □ Yes □ N – WRHA)?
If your child h	nas a Medio	c Alert Member ID nun	nber pleas	e provide	:		

EMERGENCY CONTACT INFORMATION

We request that you provide us with the names and phone numbers of <u>at least two</u> contacts, <u>other than yourself</u> (a step-parent, relative, friend, or neighbor), in case we are unable to contact you:

Contact Nan	ne:		Relationship	to Student:		
Home Phone		Cell Phone:		Work Phone:		_ Ext
Contact Nan	ne:		Relationship	to Student:		
Home Phone	9:	Cell Phone:		Work Phone:		_ Ext
Contact Nan	ne:		Relationship	to Student:		
Home Phone	:	Cell Phone:		Work Phone:		Ext
CATCHMEN	Т					
Do you live ir	n this school's catcl	nment area? □ Yes	□ No			
If no, what is	your catchment sc	hool?				
If no, why dic	l you choose to reg	ister at this school in	stead of your cat	chment area school?	•	
Childcare	Arrangements/Con	venience 🛛 Progra	ams Offered 🗆 D	vissatisfaction/disagre	ement with sta	ıff
□ Student Pi	reference for Socia	l Reasons 🛛 Discip	line Issues DC	lass Size 🛛 Other: _		
CHILD CARI	E (If Applicable)					
Child Care C	entre your child wil	l be attending:				
Private Sitter	Name:		Address:		Ph:	
USE OF PHO	ONE NUMBER AN	DEMAIL				
□Yes □N		sion to the school t so that I may be cont				
□Yes □N		Spam Legislation: I ements regarding divis				
	-					

Note: Special announcements and events are also broadcast using the divisional School Messenger telephone system.

ATTENDANCE AND BEHAVIOUR POLICIES

All students and parents are responsible for ensuring that they are familiar with and comply with the Schools' Attendance and Behaviour Policies. Copies of the policies are available in the school office and will be distributed at the beginning of the year.

GRADE LEVEL OPTIONS

The following options are offered at each grade level.

Band OR Art I You must select one (1) option.

Additional Options:

Choir □ Yes □ No (All students can choose to take choir in addition to band or art.) Jazz Band □ Yes □ No (Grade 7 & 8 students.) Dance* □ Yes □ No (* If offered.)

LUNCHROOM PRIVILEGES

Staying for lunch is a free service for students, however, co-operation is essential. Lunch privileges at school may be denied or revoked if lunch hour rules are not followed and respected. Students will eat their lunch in lunchroom. No wandering in the school is allowed. The lunchrooms are to be left clean and in proper order. If students in grade 6 who normally stay for lunch have your permission to leave the school grounds, a note must be provided to the office. Students are expected to be respectful of lunch hour rules, otherwise alternative lunch arrangements will have to be made.

My child will be using the lunchroom facilities: Yes □ No □

Parent/Guardian Signature: _____

____ Student Signature: ____

POWERSCHOOL PORTAL (Applies to Grades 7 to 12 Only)

The PowerSchool Portal provides parents access to school announcements, real-time attendance information, and most importantly, student grades. Parents can log into a secure and private web portal where they can view detailed assessment reports of their child's progress in their classes. Parents also have the option of having attendance and/or grade reports automatically emailed to them at regular intervals throughout the year. The school will provide the necessary login information to parents at the beginning of the school year.

FAMILY LIFE (Potentially Sensitive Content)

IHAE-E-2

The Physical Education/Health Education curriculum is mandated by Manitoba Education. Content related to substance use and abuse, personal safety and human sexuality is considered potentially sensitive.

Potentially sensitive content must be treated in ways that are appropriate for the local school and community context. Manitoba Education recognizes that the prime responsibility for education about issues of sexuality, including healthy relationships, consent and sexually transmitted and blood borne infections, rests with the family. It is clear to parents, teachers, and community health leaders that young people must have knowledge, skills, guidance and support if they are to make responsible and health and wellness enhancing decisions.

In accordance with this, the option is available for parents of students at all grade levels to decide whether the student should receive school-based delivery of potentially sensitive content, <u>or</u> delivery in an alternative setting of their choosing. Parents will be notified of the start date and topics to be covered prior to the program delivery.

- □ Yes, I give my child permission to receive school-based delivery of the potentially sensitive content as outlined in the Physical Education/Health Education Curriculum.
- No, I prefer that my child receive delivery of the potentially sensitive content as outlined in the Physical Education/Health Education Curriculum in an alternative setting. I understand that I am responsible for ensuring the delivery of the potentially sensitive content. Resources and curriculum materials are available through your school or on the Manitoba Education website at http://www.edu.gov.mb.ca/k12/cur/physhlth/resources.html

Parent/Guardian Signature:

Date: ____/___/____

JIHA-E-1

PARENT/GUARDIAN AND STUDENT CONSENT FOR SEARCH & USE OF LOCKER

Lockers, cupboards, desks and any other storage areas are the property of the St. James-Assiniboia School Division and as such the Division reserves the right to inspect the contents of these areas at any time. School administrators have the authority to conduct an inspection of these areas, locked or unlocked, whenever they have reasonable grounds to believe a school or division regulation, rule or discipline has been breached or a violation of the law has occurred and the search will reveal evidence of that breach or violation.

Students should consider whether they wish to keep items of a private nature in the locker.

Both parent/guardian and student must sign the Parent/Guardian and Student Consent for Search form at the time of registration in accordance with Policy JIHA, JIHA-R (Search of Student Desks, Lockers, Storage Areas, Student Effects and Student Driven Vehicles).

I have read, understand and agree with the above.

Date:		/	/
	mm	dd	уууу
Date:		/	/
	mm	dd	уууу
			dd

Note: Parents will be asked annually to sign off on JIHA-E-1 on the School Registration Form.

INTERNET USE PARENT ADVISORY

The St. James-Assiniboia School Division strongly believes that technology and access to the internet are valuable resources that teachers will use as a means to extend and enhance the learning experiences in the classroom. As such, you may expect your child to have regular access to the technology available in their school and in turn, access to the internet.

Additionally, all St. James-Assiniboia students will be supplied with a Division managed Office 365 account providing them with an email address, cloud based document storage and a set of productivity and collaboration tools that can be used at school and at home.

These resources are being provided to students with the understanding that they will be used for educational purposes only and all such use will abide by the following Division policies:

- Acceptable Student Use of Digital Technologies and Electronic Communications (Policy IJNDC and Regulation IJNDC-R)
- Acceptable Student Use of Digital Technologies and Electronic Communication (Exhibit IJNDC-E-2)
- Student Conduct (Policy JK)

STUDENT ACCEPTABLE USE AGREEMENT

I have read, or will ensure that I read, and agree to comply with the Division policies (IJNDC, IJNDC-R, IJNDC-E-2, JK) regarding my responsibilities as a St. James-Assiniboia School Division student as they pertain to my use of Information Technology. I understand and agree that access to technology as provided by the School Division is to be used for educational purposes only.

Name of Parent or Guardian: (Print):

As a parent or guardian of the above student, I have read, or will ensure that I read, and agree to support the Division's Student Acceptable Use Policies. (IJNDC, IJNDC-R, IJNDC-E-2, JK) (*Parent or guardian signature required for students less than 18 years of age*)

Student Signature:	Date:	1		1
••••••••••••••••••••••••••••••••••••••		mm	dd	уууу
Parent/Guardian Signature:	Date:	/		
		mm	dd	уууу

Note: Parents and/or students will be asked annually to sign off on Section B of IJNDC-E1 on the School Registration Form. For students who turn 18 years of age during the school year, the school will ensure that the student signs a new media release prior to their 18th birthday.

PRINT & DIGITAL MEDIA RELEASE FORM

The St. James-Assiniboia School Division recognizes that print media, digital media and the internet provide an ideal means to showcase, celebrate and promote school and Divisional activities and share student work with other students, parents/guardians, staff and the global community.

At the same time, however, the Division remains committed to protecting the privacy and safety of all students. For this reason, the Division has established a protocol for the publication, broadcast and distribution of print and digital media under regulation IJNDBA-R and policy IJNDBA.

School Division managed/sanctioned online sites are defined as:

- the Division website;
- school websites;
- teacher websites;
- teacher blogs;
- School Division sanctioned social media tools (as defined in policy GBEE);
- School-wide moderated public social media networks (as defined in policy GBEE).

The School Division requires parent/guardian consent for the use of their child's photograph, video or audio recording, samples of their child's work and the use of their child's name under the circumstances detailed below.

1. Use of Student Photograph and Name in Print and/or Digital School Yearbook*

The following may appear in print or digital versions of the school yearbook:

• Student photographs



IJNDC-E-1

IJNDC-E-1

- Video and/or audio recordings of students
- Students may be identified by first and last name.

* The term School Yearbook may also include any similar print or multimedia "school souvenir" collection to be distributed to the student body or a smaller group thereof.

2. Publication of Student Photos, Student Work Samples, Video /Audio Recordings and Use of Student Names

For the purposes of highlighting and celebrating events and activities in the school, student photographs and samples of student work may appear:

- in the printed version of the school newsletter.
- in any printed promotional material for the School Division.
- in the local community or city newspaper.
- in the online version of the school newsletter which is posted to the school website.
- on publicly accessible School Division managed/sanctioned online sites as defined above.

Video and/or audio recordings of student activities or events may appear:

- in any multimedia promotional material for the School Division.
- on publicly accessible School Division managed/sanctioned online sites as defined above.
- on television and/or radio broadcasts.

NOTE: At times, schools may choose to stream public events such as sports games, awards ceremonies or music concerts to the internet. As these events are public in nature, privacy legislation does not require the School Division to obtain parental consent to stream the event. The school will advise parents, however, when such events are being streamed to the internet.

Publication of Student Names

Students will only be identified by first name in any of publishing formats described above. In cases where a student is being recognized for a local, provincial and/or national award, both first and last names may be used.

Media Release Form Signatures

Please indicate your media release preferences and sign below. If you have any questions or require clarification related to the media release, please speak with your school administrator.

1. Permission for School Yearbook Use

YES, I DO grant the St. James-Assiniboia School Division permission to publish and distribute my child's (or my) photograph or video/audio recording in the print or digital version of the school yearbook.

NO, I DO NOT grant the St. James-Assiniboia School Division permission to publish and distribute my child's (or my) photograph or video/audio recording in the print or digital version of the school vearbook.

2. Permission for All Other Media Use

YES, I DO grant the St. James-Assiniboia School Division, and other media outlets as described, permission to publish my child's (or my) photograph, work samples, video and or audio recordings and name as per the guidelines detailed above.

NO, I DO NOT grant the St. James-Assiniboia School Division, and other media outlets as described, permission to publish my child's (or my) photograph, work samples, video and or audio recordings and name as per the guidelines detailed above.

Name of Student (Print):					
, , <u> </u>	(For students 18 years of age or older only)				
Student Signature:		Date: _	/		
	(For students 18 years of age or older only)		mm	dd	уууу
Name of Parent or Guardian (Print):					
	(Required for students less than 18 years of age)				
Parent/Guardian Signature:		Date: _	/		<u> </u>
	(Required for students less than 18 years of age)		mm	dd	уууу
	remain in effect for the current school year or until consent is r al of the change. Consent of parents/guardians may be withd			time, am	end this

INDIGENOUS IDENTITY DECLARATION

Indigenous Identity Declaration helps to support the efforts of Manitoba Education and Training and school divisions to plan and improve programs in a way that is responsive to Indigenous learners.

(Providing this personal information is voluntary and optional. It is being collected in compliance with section 36(1)(b) of The Freedom of Information and Protection of Privacy Act as it is necessary for and relates directly to the activity of Manitoba and school divisions to plan, deliver and improve programs.)

1.1

___, (name of parent/guardian, please print clearly):

Am submitting my child's Indigenous Identity Declaration for the first time

Am making changes to my child's Indigenous Identity Declaration

Already submitted my child's Indigenous Identity Declaration and have no further changes to make at this time.

2. Is your child an Indigenous person, that is, First Nation (North American Indian), Métis, or Inuk (Inuit)? Note: First Nations (North American Indian) include Status and Non-Status Indians

If "Yes", mark the square(s) that best describe(s) your child now:

□ Yes, First Nation (North American Indian)

Yes, Métis

□ Yes, Inuk (Inuit)

3. Which best describes your child's Indigenous cultural-linguistic identity? Please note that your child does not need to speak the language in order to declare. Please select up to two choices:

□ Anishinaabe (Ojibway/Saulteaux)
□ Dene (Sayisi)
□ Oji-Cree
□ Inuktitut

□ Ininiw (Cree) □ Dakota □ Michif □ Other (please specify) _

For more information about Indigenous Identity Declaration, please contact:

Indigenous Inclusion Directorate 510 Selkirk Avenue Telephone: 204-945-7886 Fax: 204-948-2010 Or visit the website at: http://www.edu.gov.mb.ca/iid/abidentity.html

Parent/Guardian Signature:	Date:	1	, I	1
-		mm	dd	уууу

The personal information is being collected under the authority of The Public Schools Act and the Education Administration Act for school division student registration purposes. It is protected by the Protection of Privacy provisions of The Freedom of Information and Privacy Act, and the Personal Health Information Act. If you have any questions or concerns about the collection of this information, contact the Access and Privacy Officer at the St. James-Assiniboia School Division, 2574 Portage Avenue, Winnipeg, MB R3J 0H8, telephone: 204-888-7951.

TRANSPORTATION

The St. James-Assiniboia School Division Transportation policy is subject to change.

Student Name:	Grade:
To be completed by students entering grade 6 that are eligible for transp	portation service.
Walking distance to their catchment area school must exceed 1.6 km.	

Transportation for Grade 7 to 12 students is on a **purchase seat** basis (please refer to SJASD Policy EEAA-E-3 Designated Schools – Brooklands and Headingley for exceptions). At this time, <u>no purchase seats will be offered for the 2022-23</u> <u>school year</u>.

□ Yes □ No My child requires transportation to and from school.

□ Yes □ No Someone must be at the stop to receive the student at drop-off. NOTE: If "yes" is checked, the student will be transported back to the school if someone is not waiting to receive the student at the doors of the bus. Written notice must be provided to the school to change this status.

Transportation Address Information:

Pick-up	Drop-off
□ Same as home address	□ Same as home address
Different address*	Different address*
Not required	Not required
(*) If the pick-up/drop-off address is different from ho	ome address, please indicate below:
Daycare/Caregiver Address:	Phone Number:
Daycare/Caregiver Name:	Daycare/Caregiver Signature:

Please note a fee may be applied for alternate addresses.

Exceptional Needs Information:

Requires assistance: Yes (*Please follow up with school office and submit a Personal Transportation Plan (PTP) Application)

Description of Service:
Regular
Wheelchair Access
Harness

□ I/We have read the School Bus Rules (Policy EEAA-E-1) and understand failure to adhere may result in loss of busing privileges as per policy EEAEC/JICC.

If this information changes at any time throughout the year, please inform the school.

Parent/Guardian Signature:	Date:		1 1	·
		mm	dd	уууу

School Use Only:
Child is an eligible rider Exceptional Needs/Special Program